

PENNIE & EDMONDS LLP

COUNSELLORS AT LAW
1155 Avenue of the Americas
New York, N.Y. 10036-2711
(212) 790-9090

ATTORNEY DOCKET NO. 9426-019Date: September 9, 1999

Assistant Commissioner for Patents
Box PATENT APPLICATION
Washington, D.C. 20231

Sir:

The following utility patent application is enclosed for filing:

Applicant(s): Ronald Taylor; Alessandre Nardin; William M. Sutherland; Mitchell M.D. Sokoloff; Leland Chung Executed on:

Title of Invention: ANTIBODIES TO A TUMOR-ASSOCIATED SURFACE ANTIGEN FOR DELIVERY OF
DIAGNOSTIC AND THERAPEUTIC AGENTS

PATENT APPLICATION FEE VALUE

TYPE	NO. FILED	LESS	EXTRA	EXTRA RATE	FEE
Total Claims	82	-20	62	\$18.00 each	\$ 1,116.00
Independent	9	-3	6	\$78.00 each	\$ 468.00
Minimum Fee					\$ 760.00
Multiple Dependency Fee If Applicable (\$260.00)					\$ 260.00
Total					\$ 2,604.00
50% Reduction for Independent Inventor, Nonprofit Organization or Small Business Concern (a verified statement as to the applicant's status is attached)					- \$ 0.00
Total Filing Fee					\$ 2,604.00

- ☒ Priority of application no. 60/099,782 and 60/123,786 filed on September 10, 1998 and March 10, 1999, respectively in the United States is claimed under 35 U.S.C. § 119 (e).
- ☐ The certified copy of the priority application has been filed in application no. filed
- ☐ Amend the specification by inserting before the first line the following sentence: This is a continuation-in-part of application no. filed .

Please charge the required fee to Pennie & Edmonds LLP Deposit Account No. 16-1150. A copy of this sheet is enclosed.

Respectfully submitted,

Geraldine F. Baldwin
Geraldine F. Baldwin
PENNIE & EDMONDS LLP

by Adriane Antler
Reg. No. 32,605

31,232
(Reg. No.)

Enclosure

This form is not for use with continuation, divisional, re-issue, design or plant patent applications.

09/09/99

Please type a plus (+) inside this box -

09/09/99
PTO

PTO/SB/29 (12/97)

Approved for use through 09/30/00. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>	Attorney Docket No.	9426-019	Total Pages	74
	First Named Inventor or Application Identifier			
	Taylor et al.			
	Express Mail Label No.	EL 168 272 852 US		

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
1. <input checked="" type="checkbox"/> Fee Transmittal Form <i>Submit an original, and a duplicate for fee processing)</i> 2. <input checked="" type="checkbox"/> Specification [Total Pages <u>60</u> <i>(preferred arrangement set forth below)</i> -Descriptive title of the Invention -Cross Reference to Related Applications -Statement Regarding Fed sponsored R&D -Reference to Microfiche Appendix -Background of the Invention -Brief Summary of the Invention -Brief Description of the Drawings (if filed) -Detailed Description of the Invention (including drawings, if filed) -Claim(s) -Abstract of the Disclosure 3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets] <u>8</u> 4. <input checked="" type="checkbox"/> Oath or Declaration (unexecuted) [Total Sheets] <u>2</u> a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 17 completed)</i> <i>[Note Box 5 below]</i> i. <input type="checkbox"/> DELETION OF INVENTORS(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33 (b). 5. <input type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.	6. <input type="checkbox"/> Microfiche Computer Program (Appendix) 7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies
ACCOMPANYING APPLICATION PARTS 8. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i> 10. <input type="checkbox"/> English Translation Document (if applicable) 11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 12. <input type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 14. <input type="checkbox"/> Small Entity <input type="checkbox"/> Statement filed in prior application, Statement(s) Status still proper and desired 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> 16. <input type="checkbox"/> Other:	

17. If a CONTINUING APPLICATION , check appropriate box and supply the requisite information: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No:				
18. CORRESPONDENCE ADDRESS <input checked="" type="checkbox"/> Customer Number or Bar Code Label 20583 <i>(Insert Customer No. or Attach bar code label here)</i> or <input type="checkbox"/> Correspondence address below				
NAME				
ADDRESS				
CITY	STATE	ZIP CODE		
COUNTRY	TELEPHONE	FAX		

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.